



Complete Summary

TITLE

Skin safety protocol -- risk assessment and prevention of pressure ulcers: percentage of patients with documentation in the medical record that a head-to-toe skin inspection and palpation were completed within six hours of admission.

SOURCE(S)

Institute for Clinical Systems Improvement (ICSI). Skin safety protocol: risk assessment and prevention of pressure ulcers. Health care protocol. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2007 Mar. 31 p. [23 references]

Measure Domain

PRIMARY MEASURE DOMAIN

Process

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the [Measure Validity](#) page.

SECONDARY MEASURE DOMAIN

Does not apply to this measure

Brief Abstract

DESCRIPTION

This measure is used to assess the percentage of patients with documentation in the medical record that a head-to-toe skin inspection and palpation were completed within six hours of admission.

RATIONALE

The priority aim addressed by this measure is to perform a head-to-toe skin inspection on all patients.

PRIMARY CLINICAL COMPONENT

Skin safety; pressure ulcers; head-to-toe skin inspection and palpation

DENOMINATOR DESCRIPTION

Total number of medical records audited for evidence of head-to-toe skin inspection (see the related "Denominator Inclusions/Exclusions" field in the Complete Summary)

NUMERATOR DESCRIPTION

Number of patient medical records that indicate a head-to-toe skin inspection and palpation were completed within six hours of admission (see the related "Numerator Inclusions/Exclusions" field in the Complete Summary)

Evidence Supporting the Measure

EVIDENCE SUPPORTING THE CRITERION OF QUALITY

- A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence

Evidence Supporting Need for the Measure

NEED FOR THE MEASURE

Unspecified

State of Use of the Measure

STATE OF USE

Current routine use

CURRENT USE

Internal quality improvement

Application of Measure in its Current Use

CARE SETTING

Hospitals

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Advanced Practice Nurses
Nurses
Physicians

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Single Health Care Delivery Organizations

TARGET POPULATION AGE

Adult and designated children

TARGET POPULATION GENDER

Either male or female

STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

Characteristics of the Primary Clinical Component

INCIDENCE/PREVALENCE

Unspecified

ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

BURDEN OF ILLNESS

Unspecified

UTILIZATION

Unspecified

COSTS

Unspecified

Institute of Medicine National Healthcare Quality Report Categories

IOM CARE NEED

Getting Better
Staying Healthy

IOM DOMAIN

Effectiveness

CASE FINDING

Users of care only

DESCRIPTION OF CASE FINDING

All patients admitted to the hospital (adult and designated children)

Records should be selected in a random way, designed to represent a cross section of patients of all ages and gender admitted to the hospital.

The time of inspection is within six hours of admission. Suggest collecting data monthly.

DENOMINATOR SAMPLING FRAME

Patients associated with provider

DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions

Total number of medical records* audited for evidence of head-to-toe skin inspection

***Note:** Random (minimal) sample of 20 charts of patients who were admitted to the hospital and stayed for longer than six hours.

Exclusions

Unspecified

RELATIONSHIP OF DENOMINATOR TO NUMERATOR

All cases in the denominator are equally eligible to appear in the numerator

DENOMINATOR (INDEX) EVENT

Institutionalization

DENOMINATOR TIME WINDOW

Time window brackets index event

NUMERATOR INCLUSIONS/EXCLUSIONS

Inclusions

Number of patient medical records that indicate a head-to-toe skin inspection and palpation were completed within six hours of admission

Note: Results of the completed head-to-toe skin inspection and palpation within six hours of admission will identify those patients at risk for development of or progression of pressure ulcers, and will cue care providers to implement skin care strategies. See the National Guideline Clearinghouse (NGC) summary of the Institute for Clinical Systems Improvement (ICSI) guideline [Skin Safety Protocol: Risk Assessment and Prevention of Pressure Ulcers](#) for details on skin care strategies.

Exclusions

Unspecified

MEASURE RESULTS UNDER CONTROL OF HEALTH CARE PROFESSIONALS, ORGANIZATIONS AND/OR POLICYMAKERS

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

NUMERATOR TIME WINDOW

Fixed time period

DATA SOURCE

Medical record

LEVEL OF DETERMINATION OF QUALITY

Individual Case

PRE-EXISTING INSTRUMENT USED

Unspecified

Computation of the Measure

SCORING

Rate

INTERPRETATION OF SCORE

Better quality is associated with a higher score

ALLOWANCE FOR PATIENT FACTORS

Unspecified

STANDARD OF COMPARISON

Internal time comparison

Evaluation of Measure Properties

EXTENT OF MEASURE TESTING

Unspecified

Identifying Information

ORIGINAL TITLE

Percent of patients with documentation in the medical record that a head-to-toe skin inspection and palpation were completed within six hours of admission.

MEASURE COLLECTION

[Skin Safety Protocol: Risk Assessment and Prevention of Pressure Ulcers](#)

DEVELOPER

Institute for Clinical Systems Improvement

FUNDING SOURCE(S)

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COMPOSITION OF THE GROUP THAT DEVELOPED THE MEASURE

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FINANCIAL DISCLOSURES/OTHER POTENTIAL CONFLICTS OF INTEREST

In the interest of full disclosure, Institute for Clinical Systems Improvement (ICSI) has adopted the policy of revealing relationships work group members have with

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Sonja Rivers and the nursing foundation of North Memorial received a grant from the Critical Care nurses Association for research on incontinence skin care.

No other work group members have potential conflicts of interest to disclose.

ICSI's conflict of interest policy and procedures are available for review on ICSI's Web site at <http://www.icsi.org>.

ADAPTATION

Measure was not adapted from another source.

RELEASE DATE

2007 Mar

MEASURE STATUS

This is the current release of the measure.

SOURCE(S)

Institute for Clinical Systems Improvement (ICSI). Skin safety protocol: risk assessment and prevention of pressure ulcers. Health care protocol. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2007 Mar. 31 p. [23 references]

MEASURE AVAILABILITY

The individual measure, "Percent of Patients with Documentation in the Medical Record that a Head-to-Toe Skin Inspection and Palpation were Completed within Six Hours of Admission," is published in "Health Care Protocol: Skin Safety Protocol: Risk Assessment and Prevention of Pressure Ulcers." This document is available from the [Institute for Clinical Systems Improvement \(ICSI\) Web site](#).

For more information, contact ICSI at, 8009 34th Avenue South, Suite 1200, Bloomington, MN 55425; phone: 952-814-7060; fax: 952-858-9675; Web site: www.icsi.org; e-mail: icsi.info@icsi.org.

NQMC STATUS

This NQMC summary was completed by ECRI Institute on May 29, 2009.

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